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**UTILITY  
PATENT APPLICATION  
TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	14325US02
First Inventor	Sid Jacobi et al.
Title	Update System For Facilitating Software Update And Data Conversion In An Electronic Device
Express Mail Label No.	EV 331533780 US

03917 U.S. PTO  
10/697458  
103003**APPLICATION ELEMENTS**

See MPEP chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
3. <input checked="" type="checkbox"/> Specification (preferred arrangement set forth below) -Descriptive title of the invention -Cross Reference to Related Applications -Statement Regarding Fed sponsored R&D -Reference to sequence listing, a table, or a computer program listing appendix -Background of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF)
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 3 ]	b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper
5. Oath or Declaration a. <input type="checkbox"/> Newly executed (original or copy)	c. <input type="checkbox"/> Statements verifying identity of above copies
b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 18 completed)	<b>ACCOMPANYING APPLICATION PARTS</b>
i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	9. <input type="checkbox"/> Assignment Papers (cover sheet & documents(s))
6 <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (when there is an assignee)
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: □ Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No.: .....	11. <input type="checkbox"/> English Translation Document (if applicable)
	12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
	13. <input type="checkbox"/> Preliminary Amendment
	14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
	15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)
	16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122(b) (2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
	17. <input type="checkbox"/> Other: .....

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76:  
□ Continuation  Divisional  Continuation-in-part (CIP) of prior application No.: .....

Prior application information: Examiner: \_\_\_\_\_ Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

<input checked="" type="checkbox"/> Customer Number:	23446	OR <input type="checkbox"/> Correspondence address below		
Name _____				
Address _____				
City _____	State _____	Zip Code _____		
Country _____	Telephone _____	Fax _____		
Name (Print/type)	Fredrick T. French III	Registration No. (Attorney/Agent)	52,524	
Signature			Date	October 30, 2003

10/30/03

PTO/SB/17 (11-00)

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# **FEE TRANSMITTAL**

## **for FY 2004**

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**TOTAL AMOUNT OF PAYMENT** (\$520.00)

<b>FEE TRANSMITTAL</b> <b>for FY 2004</b>		<b>Complete if Known</b>	
Patent Fees are subject to annual revision.		Application Number Filing Date First Named Inventor Examiner Name Group Art Unit	Unassigned Herewith Sid Jacobi et al. Unassigned Unassigned
<b>TOTAL AMOUNT OF PAYMENT</b>	(\$)520.00	Attorney Docket No. 14325US02	

\*\*or number previously paid, if greater; For Reissues, see above

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**SUBTOTAL (3)** (\$0.00)

SUBMITTED BY			Complete (if applicable)		
Name (Print/Type)	Frederick T. French III	Registration No. (Attorney or Agent)	52,524	Telephone	312-775-8000
Signature				Date	October 30, 2003

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